

NDPERS BOARD MEETING

Agenda

Bismarck Location:
ND Association of Counties
1661 Capitol Way
Fargo Location:
BCBS, 4510 13th Ave SW

January 18, 2007

Time: 8:30 AM

I. MINUTES

- A. December 21, 2006

II. GROUP INSURANCE

- A. Annual NDPERS Utilization Study – BCBS (Information)
- B. Dental Enrollment – Kathy (Information)
- C. Heart of America Health Plan – Kathy (Board Action)
- D. Surplus/Affordability Update – Bryan (Information)

III. DEFERRED COMPENSATION

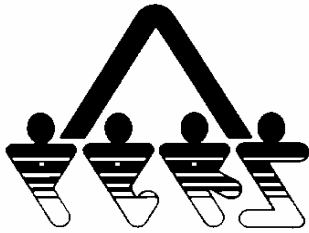
- A. Financial Hardship Presentation – Melanie Walker (Information)
- B. Provider Training Compliance (Chase Insurance) – Kathy (Board Action)

IV. LASR Update – Deb (Information)

V. MISCELLANEOUS

- A. Board Election – Kathy (Board Action)
- B. Legislative Update – Sparb (Information)
- C. 2006 Annual Report – Sparb (Information)
- D. SIB Agenda – (Information)

Any individual requiring an auxiliary aid or service must contact the NDPERS ADA Coordinator at 328-3900, at least 5 business days before the scheduled meeting.



North Dakota
Public Employees Retirement System
400 East Broadway, Suite 505 • Box 1657
Bismarck, North Dakota 58502-1657

Sparb Collins
Executive Director
(701) 328-3900
1-800-803-7377

FAX: (701) 328-3920 • EMAIL: NDPERS@state.nd.us • discovernd.com/NDPERS

Memorandum

TO: PERS Board

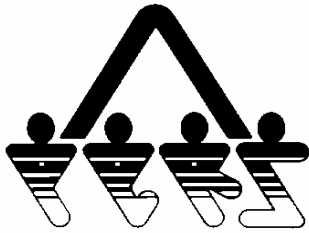
FROM: Sparb

DATE: January 10, 2007

SUBJECT: Health Care Utilization Study
Annual Management Information System Study

Attached is the Health Care Utilization Study as well as a presentation relating to the NDPERS Annual Management Information System Study.

Representatives from BCBS will be at the meeting to discuss the above reports.



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Memorandum

TO: NDPERS Board
FROM: Kathy
DATE: January 10, 2007
SUBJECT: Dental Enrollment

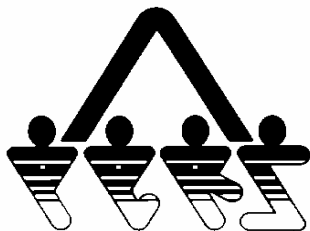
In August last year, the Board awarded the voluntary dental insurance contract to CIGNA. Open enrollment was conducted for active employees from October 23 through November 13, 2006. Employees enrolled in the plan through ING were transferred by electronic file upload to CIGNA. Following is a breakdown by coverage type of the total enrollment in the dental plan as of January 1, 2007:

Coverage Level	Number of Contracts		
	Actives	Retirees	COBRA
Employee	1,627	787	61
Employee+Child(ren)	319	2	10
Employee+Spouse	744	307	16
Employee+Family	<u>988</u>	<u>9</u>	<u>12</u>
Total	3,678	1,105	99 = <u>4,882</u>

There is an increase of 551 contracts for the active group. Retirees were not eligible to participate in the open enrollment. Following is a breakdown by coverage type for the new participants:

Coverage Level	
Employee	205
Employee+Child(ren)	50
Employee+Spouse	134
Employee+Family	<u>162</u>
Total	551

This represents an increase in participation of approximately 17.6% for the active group.



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Memorandum

TO: NDPERS Board

FROM: Kathy

DATE: January 10, 2007

SUBJECT: Heart of America Health Plan

Attached is a request from Heart of America in Rugby to continue to offer its health plan membership to state employees in its Rugby service area. The term of this renewal is from July 1, 2007 through June 30, 2008. The new rates are included in the materials provided by Heart of America. The premiums for the high and low options increased by approximately 6.9% and there is an approximate 8% increase in premiums for the share option.

A copy of the current Provider Agreement is included for your information. Last year the Board approved the plan for the Rugby service area. All other required information is attached and appears to be in order. The State Insurance Department has indicated that it has not received any inquiries or appeals on Heart of America over the past year. The following outlines the current enrollment in the plan:

Rolette County Contracts
3 Single

NDSU Contracts
1 Family

Pierce County Contracts
2 SPD
1 Family

Game & Fish
1 SPD

BOARD ACTION REQUESTED

Accept or reject the Heart of America request to continue to offer its health plan to PERS membership in the Rugby service area.

HEART OF AMERICA HEALTH PLAN PROVIDER AGREEMENT

This is an agreement between the North Dakota Public Employees Retirement System (PERS) and Heart of America Health Plan (Heart of America), 810 S. Main Avenue, Rugby, North Dakota, 58368.

Whereas the PERS Board may contract with one or more health maintenance organizations to provide eligible employees the option of membership in a health maintenance organization pursuant to North Dakota Century Code (N.D.C.C.) 54-52.1-04.1.

Whereas Heart of America on January 6, 2006 submitted a request to offer Heart of America membership to qualified North Dakota public employees.

Whereas the PERS Board has determined that Heart of America has met the applicable qualifications.

Whereas the PERS Board on February 16, 2006 has exercised its discretion to include Heart of America's participation as a health plan within the Uniform Group Insurance Program.

TERMS AND CONDITIONS

1. **Term of Agreement.** The term of this agreement is for a period of twelve months, commencing on the first day of July 2006, and terminating on the 30th day of June 2007.

2. **Premium Rate.** The following rates shall be effective for the term of this agreement:

	<u>High Option</u>	<u>Low Option</u>	<u>Share Option</u>
Single	\$327.80	\$300.50	\$242.10
Single plus Dependent	\$563.60	\$518.50	\$418.20
Family	\$770.40	\$714.20	\$576.30

3. **Service Area.** The service area shall be those communities identified in the Group Benefit Plan for the Rugby Service Area.

4. **Termination.** This contract may be terminated by mutual consent of both parties, or by either party upon 30 days' written notice.

PERS may terminate this contract effective upon delivery of written notice to Heart of America, or at such later date as may be stated in the notice, under any of the following conditions:

- a. If funding from federal, state, or other sources is not obtained and continued at levels sufficient to allow for purchase of the services or supplies in the indicated quantities or term. The contract may be modified by agreement of the parties in writing to accommodate a reduction in funds.
- b. If federal or state laws, rules or regulations are modified or interpreted in such a way that the services are no longer allowable or appropriate for purchase under this contract or are no longer eligible for the funding proposed for payments authorized by this contract.
- c. If any license, permit or certificate required by law, rule or regulation, or by the terms of this contract, is for any reason denied, revoked, suspended or not renewed.

- d. If Heart of America amends or terminates its group contract filed with the Insurance Commissioner.

Any such termination of this contract shall be without prejudice to any obligations or liabilities of either party already accrued prior to such termination.

5. **Indemnity.** Heart of America agrees to indemnify, save and hold harmless the State of North Dakota, the North Dakota Public Employees Retirement System, including its Board of Trustees, officers and employees, from any and all claims of any nature, including all costs, expenses and attorneys' fees, which may in any manner result from or arise out of this agreement; except for claims resulting from or arising out of the State's sole negligence. Heart of America also agrees to indemnify, save and hold the State of North Dakota and the North Dakota Public Employees Retirement System, including its Board of Trustees, officers and employees, harmless from all costs, expenses and attorneys' fees incurred in establishing and litigating the indemnification coverage provided herein.
6. **Assignment and Delegation.** Heart of America may not assign or otherwise transfer or delegate any right or duty without the express written consent of the PERS Board.
7. **Modification.** This agreement may not be waived, altered, modified, supplemented, or amended, in any manner, except by written agreement signed by both parties.
8. **Group Contract.** Heart of America's group contract filed and approved with the Insurance Commissioner under N.D.C.C. §26.1-18.1-07 is incorporated herein by reference and Heart of America agrees to comply with all statements contained in that agreement except where such statements are modified herein.
9. **Coverage.** Heart of America's listing of benefits and services outlined in its request to offer membership to qualified PERS members is incorporated herein by reference.
10. **Payment.** PERS will pay Heart of America the following amount for each type of contract:

<u>State Contracts</u>	<u>High Option</u>	<u>Low Option</u>	<u>Share Option</u>
Single	\$327.80	\$300.50	\$242.10
Single plus Dependent	\$563.60	\$518.50	\$418.20
Family	\$643.12	\$643.12	\$576.30

<u>Political Subdivision Contracts</u>	<u>High Option</u>	<u>Low Option</u>	<u>Share Option</u>
Single	\$327.80	\$300.50	\$242.10
Single plus Dependent	\$563.60	\$518.50	\$418.20
Family	\$770.40	\$714.20	\$576.30

11. **Premium Differential.** The difference between the Health Plan's premium outlined in Provision 2, and the PERS payment outlined in Provision 10, must be collected from the member. Heart of America is responsible for attaining and maintaining appropriate payroll deduction authorization from the participating member and submitting it to the member's employer (i.e., payroll department) by June 1 of each year and thereafter within fifteen days of enrollment. A copy of such authorization must also be filed with PERS.
12. **Enrollment.** Heart of America must file a copy of the enrollment application with PERS by June 1 of each year and thereafter within fifteen days of enrollment. The application must include the type of contract and its effective date.

13. **Legal Compliance.** Heart of America agrees to comply at its own expense with all federal and state laws and all regulations promulgated under those laws in carrying out its responsibilities outlined in this agreement.
14. **Merger.** This agreement constitutes the entire agreement between the parties. There are no understandings, agreements, or representations, oral or written, not specified within this agreement.
15. **State Audit.** The books, records, documents, and all other records in any form, and the accounting practices and procedures of Heart of America relevant to this Agreement are subject to examination by the North Dakota State Auditor or the Auditor's designee. Heart of America will maintain all such records for at least three years following completion of this contract.

Jon Strinden, Chairman
North Dakota Public Employees
Retirement System Board

Chief Executive Officer
Heart of America Health Plan



810 S. Main, Rugby, ND 58368

(701) 776-5848 or 800-525-5661

December 28, 2006



Sparb Collins
North Dakota Public Employees Retirement System
Box 1657
Bismarck, ND 58502

RE: Request to offer Heart of America Health Plan membership
to qualified North Dakota Public Employees

Dear Mr. Collins,

The Heart of America Health Plan is requesting its continued participation in the North Dakota Public Employees Retirement System. We are asking for continued participation for eligible employees living in the Rugby service area. We are also enclosing the following information in compliance with Article 71-03-02 of the NDCC 54-52-1:

1. Copy of Certificate of Authority issued by the ND Commissioner of Insurance.
2. Copy from the Secretary of Health and Human Services that Heart of America Health Plan is a federally qualified HMO.
3. Rate Sheets for 2007.
4. The Heart of America Health Plan agrees to hold open enrollment coinciding with the dates the board holds open enrollment for the program.
5. Enclosed are financial statements for Heart of America Health Plan.
6. Updated benefit grids for 2007 benefit changes.
7. Provider Directory for the Rugby service areas.

As in the past, we are submitting this information to assure our continued participation with NDPERS as a health carrier for our Rugby service area. Please consider this at your next meeting and let us know if any further information is needed. Thank you for your consideration of our request.

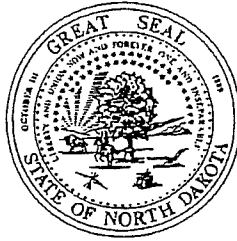
Sincerely,


Mary Schmaltz
Marketing Representative

Enc.

Cc: Kathy Allen

STATE OF NORTH DAKOTA
Department of Insurance



Certificate of Authority

This Is To Certify that pursuant to the Insurance Code of the State of North Dakota, Heart of America HMO, organized under the laws of North Dakota, subject to its Articles of Incorporation or other fundamental organizational documents is hereby authorized to transact within the State of North Dakota, subject to provisions of this certificate, the following lines of insurance:

Accident & Health

as such lines are now or may hereafter be defined in Title 26.1, the insurance laws of the State of North Dakota.

This certificate is expressly conditioned upon the holder hereof now and hereafter being in full compliance with all of the applicable laws and lawful requirements made under authority of the laws of the State of North Dakota as long as such laws or requirements are in effect and applicable, and as such laws and requirements now are, or may hereafter, be changed or amended.

This certificate is at all times the property of the State of North Dakota and shall continue in force as long as the Insurer is entitled thereto under the laws of the State of North Dakota and until suspended or revoked or otherwise terminated, at which time the Insurer shall promptly deliver this Certificate to the Insurance Commissioner of the State of North Dakota.

In Witness Whereof, I have hereunto set my hand at the City of Bismarck, on July 1, 2000.

GLENN POMEROY

A handwritten signature in cursive script, reading "Glenn Pomeroy".

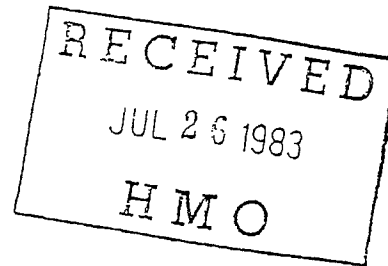
COMMISSIONER OF INSURANCE

Bureau of Health Maintenance Organizations
and Resources Development

Health Resources and
Services Administration
Rockville MD 20857

July 22, 1983

Mr. Kenneth L. Ulmer
Executive Director
Heart of America Health Maintenance
Organization
Human Service Center
Rugby, North Dakota 58368



Dear Mr. Ulmer:

We are pleased to inform you that Heart of America Health Maintenance Organization meets the requirements of an operational group model qualified health maintenance organization in accordance with Title XIII of the Public Health Service Act and 42 CFR 110.603. This finding is based on a review of the qualification application, other submissions to the Department and on-site inspections. The service area shown in the enclosure has been approved.

Qualification will be effective on the date of the signature on the enclosed assurance document by which the HMO agrees to continue to abide by the requirements of the Act and applicable regulations. To assist us in verifying continued compliance with the requirements of the Act, Heart of America Health Maintenance Organization must comply with the National Data Reporting Requirements for a Type A HMO. These reporting requirements will be sent to you by the Division of Compliance upon receipt of your assurances.

Please sign, notarize, and return the assurances to the Division of Qualification, Room 9-21 Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857 within 30 days of the date of this letter. If the assurances are not returned by this date, we will assume that Heart of America Health Maintenance Organization is declining designation as a federally qualified health maintenance organization.

My best wishes for success in your HMO endeavors.

Sincerely

A handwritten signature in cursive script that reads "Frank Seubold".

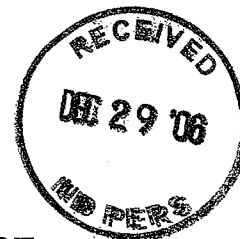
Frank H. Seubold, Ph.D.
Acting Associate Director for
Health Maintenance Organizations

Enclosures

cc: Chairman of the Board



810 S. Main, Rugby, ND 58368 • (701) 776-5848 or 800-525-5661



HEART OF AMERICA HEALTH PLAN RATES - 2007

RUGBY PLAN

Group

CONTRACT

PLAN TYPE

	<u>HIGH OPTION</u>	<u>LOW OPTION</u>	<u>SHARE OPTION</u>
SINGLE	\$350.50	\$321.30	\$261.60
SINGLE PLUS DEPENDENT	\$602.50	\$554.30	\$451.70
FAMILY	\$823.40	\$763.40	\$622.40

EXCELLENT COVERAGE AND LESS CONFUSION!

- ~ GREAT CLINIC COVERAGE
- ~ EXCELLENT MATERNITY COV. (YOU PAY VIRTUALLY NOTHING - HIGH OPTION)
- ~ NO HOSPITAL DEDUCTIBLE (HIGH OPTION)
- ~ LESS OUT/POCKET COST (HIGH AND LOW OPTION)
- ~ COMPREHENSIVE COVERAGE, INCLUDING PREVENTIVE HEALTH SERVICES, REFERRAL SERVICES AND OUT-OF-AREA EMERGENCIES

HAHP'S BALANCE SHEET

As of 10-31-06



ASSETS	Current YTD	Previous YTD
General Checking	\$585,030	\$239,250
Money Market Accounts	\$74,102	\$48,666
Investors Real Estate Trust (IRET)	\$138,806	\$148,666
Bonds	\$157,700	\$162,951
CD's	\$573,353	\$553,176
Accrued Interest on Investments	\$16,777	\$15,014
Premium Income	\$14,014	\$66,769
A/R Reinsurance	\$1,013	\$37,483
A/R HCFA Settlements	\$0	\$0
A/R Operations	\$0	\$0
Prepaid Insurance	\$0	\$0
Furniture, Equipment & Leasehold	\$912	\$3,104
TOTAL ASSETS	\$1,561,707	\$1,275,079
LIABILITIES		
Unearned Premium		
Rugby Non-Medicare	\$41,766	\$45,934
Minot Non-Medicare	\$3,664	\$5,720
Rugby Medicare	\$44,544	\$46,356
HCFA Contribution	\$0	\$0
A/P Administrative Bills	\$0	\$0
A/P Premium Tax	(\$3,638)	(\$5,728)
A/P Payroll Taxes	\$687	\$345
Accrued Vacation	\$10,791	\$9,565
IRA's Payable	\$0	\$0
Claims Adjustment Payable	\$18,592	\$18,012
Reported But Unpaid Claims	\$242,968	\$170,242
Incurred But Not Reported	\$284,811	\$244,959
TOTAL LIABILITIES	\$644,185	\$535,405
FUND BALANCE (w/ Surplus Note)	\$917,522	\$739,674
TOTAL LIAB. & FUND BALANCE	\$1,561,707	\$1,275,079

HAHP Income Statement

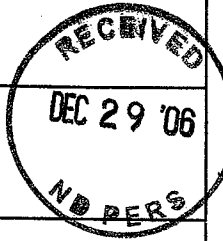
As of 10-31-06



REVENUE	Current Month	Current YTD	Previous YTD
Rugby Non-Medicare Premium	\$296,029	\$2,899,388	\$2,736,427
Minot Non-Medicare Premium	\$12,997	\$154,837	\$172,130
Medicare Premium	\$120,828	\$1,234,979	\$1,318,274
Rugby Reinsurance	\$0	\$22,097	\$162,883
Minot Reinsurance	\$0	\$0	\$0
Interest	\$4,308	\$30,126	\$25,767
HCFA Settlement Reimbursement	\$0	\$1,278	\$10,081
TOTAL REVENUE	\$434,162	\$4,342,705	\$4,425,562
EXPENSES			
Rugby			
Capitation Payments	\$98,774	\$1,100,635	\$1,301,791
In-Area Services	\$30,560	\$284,810	\$242,460
Referral Services	\$295,127	\$2,457,503	\$2,371,638
Out-Of-Area Services	\$4,030	\$51,352	\$133,266
Other Medical Services	\$732	\$57,484	\$69,150
Minot			
In-Area Services	\$30,752	\$334,754	\$380,811
Out-Of-Area Services	\$978	\$5,247	\$29,396
Other Medical Services	\$45	\$2,684	\$8,055
Discounts from Providers	(\$102,427)	(\$781,016)	(\$700,269)
Reinsurance	\$36,323	\$331,196	\$294,396
Premium Tax	\$6,226	\$61,513	\$59,488
Plan Administration	\$30,395	\$336,366	\$320,468
TOTAL EXPENSES	\$431,515	\$4,242,528	\$4,510,650
SURPLUS (DEFICIT)	\$2,647	\$100,177	(\$85,088)
Unrealized Gain/Loss w/ Investments	\$0	\$0	\$0
Realized Gain/Loss w/ Investments	\$0	\$129	\$0
NET SURPLUS / DEFICIT	\$2,647	\$100,306	(\$85,088)

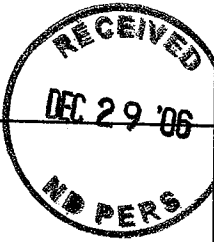
Heart of America Health Plan "High Option Plan"

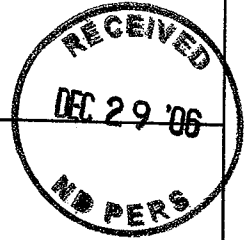
NO Annual Deductibles!!		COPAYMENT	HAHP	EXCEPTIONS/LIMITATIONS
DESCRIPTION OF BENEFITS		AMOUNT YOU PAY	BENEFIT AMOUNT	
Preventive Health Services Routine childhood and adult immunizations. Routine physicals, Gynecological exams, Prostate screenings, Mammograms, Pap smears, and other preventive health services.		\$0 \$15	100% 100%	No maximum benefit allowance.
Physician Services Hospital visits, including inpatient and skilled nursing facility visits. Office visits and/or house calls authorized by PCP. Specialist consultation and treatment when authorized by PCP.		\$0 \$15 \$25	100% 100% 100%	
Diagnostic / Therapeutic Services X-Rays, CT scans, MRI, Electrocardiograms, Laboratory Tests, Chemotherapy, Radiation, & other medically necessary services.		\$0	100%	
Inpatient Hospital Services Semi-private room, Physician services, General nursing services, Surgery and facilities, Intensive care, & other medically nec. services.		\$0	100%	
Outpatient Hospital Services at Heart of America Med. Center.		\$0	100%	
Maternity Services Prenatal care. Hospital services, Birthing/delivery, & Newborn nursery. Well-baby care.		\$15 \$0 \$15	100% 100% 100%	\$15 copay on first visit. Then 100% covered. Until 24 months old.
Emergency Services Emergency room, Physician/Nursing services, & Ambulance services.		\$30	100%	In or Out of Area Emergencies.
Mental Health Services Inpatient &/or Partial hospitalization. Outpatient Residential Treatment		\$0 \$0	100% 100%/80% 100%	Inpatient Max: 45 days per calendar year. Outpatient: 100% hours 1-5; hours 6-30 80% Up to 120 days per member per calendar year
Alcohol and Substance Abuse Services Inpatient &/or Partial hospitalization. Outpatient.		\$0	100% 100%/80%	Inpatient Max: 60 days per calendar year. Outpatient: 100% visits 1-5; visits 6-20 80%
Referral Services Authorized referral to a specialty physician or facility on the HAHP preferred physician referral list. Authorized referral to a specialty physician or facility NOT on the HAHP preferred physician referral list when services can NOT be provided by participating providers. Authorized referral to a specialty physician or facility NOT on the HAHP preferred physician referral list when services CAN be provided by participating providers.		\$25 \$25 \$25	100% 100% 80%	With prior authorization by PCP and HAHP With prior authorization by PCP and HAHP With prior authorization by PCP and HAHP \$3,000 coinsurance maximum per contract per calendar year.
Chiropractic Care		\$10	100%	With prior approval by PCP and HAHP
Physical, Speech, and Occupational Therapy		\$10	Short-term therapy is 1st two consecutive months. Long-term therapy is one PT and one OT visit/month following short term.	
Durable Medical Equipment Orthopaedic and Prosthetic Devices.		80% coverage on items exceeding \$25. Coinsurance max. payable by the member is \$500/contract/year. Maximum benefit is \$3,500 member/year.		
Skilled Nursing Facility Medical care and treatment including room and board, when prescribed by PCP and in participating provider facility.		100% coverage when authorized by primary care physician. (Up to 60 days per calendar year)		
TMJ (Temporomandibular joint disorder) CMJ (Craniomandibular joint disorder)		Lifetime maximum of \$10,000 surgical, \$2,500 non-surgical/member.		
Home Health Nursing Care		100% coverage when authorized by primary care physician.		
Hospice Services		Covered in accordance with Medicare Guidelines.		
This sheet describes the essential features of the HAHP plan in general terms and is not intended to be a full description.				



Heart of America Health Plan

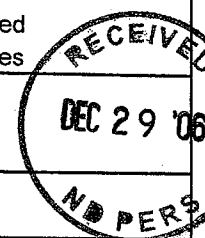
"Low Option Plan"

NO Annual Deductibles!!		COPAYMENT	HAHP	EXCEPTIONS/LIMITATIONS
DESCRIPTION OF BENEFITS		AMOUNT YOU PAY	BENEFIT AMOUNT	
Preventive Health Services Routine childhood and adult immunizations. Routine physicals including prostate & breast exams, Gynecology exams, and other preventive health services. (See Diagnostic Services below for Mammograms, Pap smears & PSA's)		\$0 \$15	100% 100%	No maximum benefit allowance. 
Physician Services Hospital visits, including inpatient and skilled nursing facility visits. Office visits and/or house calls authorized by PCP. Specialist consultation and treatment when authorized by PCP.		\$0 \$15 \$25	100% 100% 100%	
Diagnostic / Therapeutic Services Pap smears, Mammograms, PSA's, X-Rays, CT scans, MRI's, EKG's, Lab tests, Chemotherapy, Radiation, & other medically necessary services.		\$0	100%	20% Coinsurance will be applied to readings & interpretations for these services billed by an outside facility.
Inpatient Hospital Services Semi-private room, Physician services, General nursing services, Surgery and facilities, Intensive care, & other medically nec. services.		\$250 (1st/4th Day)	100%	\$1,000 copay maximum per contract per calendar year
Outpatient Hospital Services at Heart of America Med. Center.		\$0	100%	
Maternity Services Prenatal care. Hospital services, Birthing/delivery, & Newborn nursery. Well-baby care.		\$15 \$250 (1st/4th day) \$15	100% 100% 100%	\$15 copay on first visit. Then 100% covered. \$1,000 copay max per calendar year Until 24 months old.
Emergency Services Emergency room, Physician/Nursing services, & Ambulance services.		\$30	100%	In or Out of Area Emergencies.
Mental Health Services Inpatient &/or Partial hospitalization. Outpatient. Residential Treatment		\$250 (1st/4th day) \$250 (1st/4th day)	100% 100%/80% 100%	Inpatient Max: 45 days per calendar year. Outpatient: 100% hours 1-5; hours 6-30 80% Up to 120 days per member per calendar year
Alcohol and Substance Abuse Services Inpatient &/or Partial hospitalization. Outpatient.		\$250	100% 100%/80%	Inpatient Max: 60 days per calendar year. Outpatient: 100% visits 1-5; visits 6-20 80%
Referral Services Authorized referral to a specialty physician or facility on the HAHP preferred physician referral list. Authorized referral to a specialty physician or facility NOT on the HAHP preferred physician referral list when services can NOT be provided by participating providers. Authorized referral to a specialty physician or facility NOT on the HAHP preferred physician referral list when services CAN be provided by participating providers.		\$25 \$25 \$25	80% 80% 80%	\$500 coinsurance max. per calendar year \$500 coinsurance max. per calendar year With prior authorization by PCP and HAHP. \$3,000 coinsurance max. per calendar year
Chiropractic Care		\$10	80%	With prior approval by PCP and HAHP.
Physical, Speech, and Occupational Therapy		\$10	Short-term therapy is 1st two consecutive months. Long-term therapy is one PT and one OT visit/month following short term	
Durable Medical Equipment Orthopaedic and Prosthetic Devices.		80% coverage on items exceeding \$25. Coinsurance max. payable by the member is \$500/contract/year. Maximum benefit is \$3,500/member/year.		
Skilled Nursing Facility Medical care and treatment including room and board, when prescribed by PCP and in participating provider facility.		100% coverage when authorized by primary care physician. (Up to 60 days per calendar year)		
CMJ (Cranio-mandibular joint disorder) TMJ (Temporomandibular joint disorder)		Lifetime maximum of \$10,000 surgical, \$2,500 non-surgical/member.		
Home Health Nursing Care		100% coverage when authorized by primary care physician.		
Hospice Services		Covered in accordance with Medicare Guidelines.		
This sheet describes the essential features of the HAHP in general terms and is not intended to be a full description.				



Heart of America Health Plan "Share Option Plan"

DESCRIPTION OF BENEFITS	COPAYMENT AMOUNT YOU PAY	BENEFIT AFTER DEDUCT.	EXCEPTIONS/LIMITATIONS
Deductibles= SNG-\$500 SPD-\$750 FAM-\$1000 Coinurance Max/Yr= SNG-\$1000 SPD-\$1500 FAM-\$2000 Preventive Health Services (By Primary Care Physician) Routine childhood and adult immunizations. Routine physical exam including Prostate & Breast exams, Gynecological exams, and other preventive health services.	\$0 \$15	100% 100%	No maximum benefit allowance. Deductible Waived
Physician Services (By Primary Care Physician) Hospital visits, including inpatient and skilled nursing facility visits. Office visits and/or house calls authorized by PCP.	\$0 \$15	100% 100%	Deductible Waived
Diagnostic Services Mammograms, Pap smears, PSA's, X-Rays, CT scans, MRI's, EKG's, Lab Tests & other medically necessary services provided at HAMC or other facility	\$0	80%	Deductible Applies
Chemotherapy & Radiation Therapy Services provided at JCPC Services provided at HAMC or contracted Referral Facility	\$0 \$0	100% 80%	Deductible Waived Deductible Applies
Inpatient Hospital Services Semi-private room, Physician services, General nursing services, Surgery and facilities, Intensive care, & other medically nec. services.	\$0	80%	
Outpatient Hospital Services <i>at Heart of America Medical Center or Referral Facility.</i>	\$0	80%	
Maternity Services Prenatal care (at JCPC) Hospital services, Birthing/delivery, & Newborn nursery. Well-baby care (at JCPC)	\$15 \$0 \$15	100% 80% 100%	\$15 copay on first visit. Then 100% covered. Deductible applies Until 24 months old. Deductible Waived.
Emergency Services Emergency room, Physician/Nursing services.	\$30	80%	In or Out of Area Emergencies.
Ambulance Services	\$0	80%	When medically necessary
Mental Health Services Inpatient &/or Partial hospitalization. Outpatient. Residential Treatment	\$0 \$0 \$0	80% 80% 80%	Inpatient Max: 45 days per calendar year. 100% hours 1-5; (hours 6-30 80% after deductible) Up to 120 days per member per calendar year
Alcohol and Substance Abuse Services Inpatient &/or Partial hospitalization. Outpatient.	\$0 \$0	80% 80%	Inpatient Max: 60 days per calendar year. 100% visits 1-5; (visits 6-20; 80% after deduct.)
Referral Services Authorized referral to a specialty physician or facility on the HAHP preferred physician referral list. Authorized referral to a specialty physician or facility NOT on the HAHP preferred physician referral list when services can NOT be provided by participating providers. Authorized referral to a specialty physician or facility NOT on the HAHP preferred physician referral list when services CAN be provided by participating providers.	\$25 \$25 \$25	80% 80% 60%	With prior authorization by PCP and HAHP With prior authorization by PCP and HAHP With prior authorization by PCP and HAHP
Chiropractic Care	\$10	80%	With prior approval by PCP and HAHP
Physical, Speech, and Occupational Therapy Outpatient	\$10	80%	Short-term therapy: 1st two consecutive months Long-term therapy: one PT/ one OT visit/month
Durable Medical Equipment Orthopaedic and Prosthetic Devices.	\$0	80%	\$2,000 Maximum Benefit per member/year.
Skilled Nursing Facility Medical care and treatment including room and board, when prescribed by PCP and in participating provider facility.	\$0	80%	When authorized by primary care physician. (up to 60 days per calendar year)
TMJ/CMJ (Temporomandibular/Craniomandibular joint disorder)	\$0	80%	Lifetime max. of \$10,000 surg./\$2,500 non-surg.
Home Health Nursing Care	\$0	80%	when authorized by primary care physician.
Hospice Services	\$0	80%	Covered in accordance with Medicare Guidelines.
This sheet describes the essential features of the HAHP plan in general terms and is not intended to be a full description.			





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Public Employees Retirement System
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Bismarck, North Dakota 58502-1657

Sparb Collins
Executive Director
(701) 328-3900
1-800-803-7377

FAX: (701) 328-3920 • EMAIL: NDPERS-INFO@ND.GOV • www.nd.gov/ndpers

M E M O R A N D U M

TO: NDPERS BOARD
SPARB COLLINS, NDPERS
KATHY ALLEN, NDPERS

FROM: *BTR*
BRYAN T. REINHARDT

DATE: December 31, 2006

SUBJECT: GROUP MEDICAL PLAN - SURPLUS/AFFORDABILITY UPDATE

Here is the November surplus projection and affordability analysis for the NDPERS group medical plan. The plan made it through the 2003-2005 biennium and is in the last half of the 2005-2007 period.

Net premium sent to BCBS in July 2005 was \$10,853,370. For comparison, net premium sent to BCBS in June 2005 was \$9,821,731. The NDPERS health plan ended up with 23,580 contracts in June, 2005. There were 22,947 contracts in June, 2003, and 21,792 in July 2001. There are now 24,189 contracts.

The projection for the 2003 - 2005 biennium shows an ending balance of \$15.67 million. The cash settlement back to NDPERS should be around \$1.4 million. The \$14.3 million deposit date for the 05-07 biennium was July 1, 2006. These amounts are at BCBS and receiving interest.

The projection for the 2005 - 2007 biennium shows a June 30, 2007 ending balance of less than \$1 million. Since we share 50/50 in the first \$3.0 million surplus with BCBS, future growth in this surplus will be difficult.

If you have any questions or you should need anymore information, please contact me.

NDPERS - ESTIMATED SURPLUS PROJECTION: 2005-2007 BIENNIUM

November, 2006

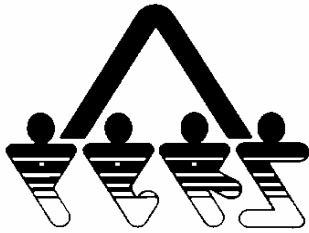
The following exhibit summarizes the estimated surplus for the NDPERS group medical plan at the end of the 2005-2007 biennium. The estimate has been updated to include account activity through November, 2006.

1) Preliminary Underwriting Gain for the 2005-2007 Biennium	(\$15,660,900)
2) Cash Balance Interest Accumulation	\$887,758
3) Estimated Underwriting Gain for the 2005-2007 Biennium	(\$14,773,142)
5) Refunds and Settlements	
07/05/05 Perform Rebate (Included as claim rebates)	\$418,453
10/04/05 Perform Rebate (Included as claim rebates)	\$425,316
12/01/05 Perform Rebate (Included as claim rebates)	\$8,716
01/01/06 Perform Rebate (Included as claim rebates)	\$350,907
03/01/06 Perform Rebate (Included as claim rebates)	\$15,236
04/01/06 Perform Rebate (Included as claim rebates)	\$384,639
07/04/06 Perform Rebate (Included as claim rebates)	\$280,399
10/01/06 Perform Rebate (Included as claim rebates)	\$288,072
01/01/07 Perform Rebate	\$275,000
04/01/07 Perform Rebate	\$275,000
EPO Settlement Payments 7/05 - 6/06 (Included as rebates & paid)	\$1,277,000
EPO Settlement Payments 7/06 - 6/07 (Included as rebates & paid)	\$0
6) Cash Reserve Account Balance	\$15,666,912
2003-2005 Settlement Cash Out:	(\$1,439,151)
Future Interest:	\$441,452
Total	\$14,669,213
7) Total Estimated Surplus Held by BCBS	\$1,723,071
8) BCBS Portion of Surplus (50% upto \$1,500,000)	\$861,535
9) PERS Portion of Surplus Held by BCBS	\$861,535
10) NDPERS Wellness Accounts	
My Health Connection	\$169,142
Employer Based Wellness	\$63,478
Wellness Benefit Program	\$25,318
SubTotal	\$257,939
Total Adjusted for Usage	\$0
11) Total Estimated Funds Available to PERS on June 30, 2007	\$861,535

NDPERS - Projected Underwritten Experience for the 2005-2007 Biennium
November, 2006

MONTH	NET PREMIUM COLLECTED	PREMIUM ADJUSTMENT	TOTAL PREMIUM INCOME	ADMIN EXPENSE \$26.98/CON	NET PREMIUM	CLAIMS INCURRED & PAID TO DATE	ESTIMATED IBNR CLAIMS	TOTAL INCURRED CLAIMS (1)	ESTIMATED GAIN / LOSS
Jul-05	\$11,491,070	(\$2,387)	\$11,488,683	\$637,699	\$10,850,984	\$10,912,692	\$0	\$10,912,692	(\$61,708)
Aug-05	\$11,486,984	\$0	\$11,486,984	\$635,676	\$10,851,308	\$10,768,903	\$0	\$10,768,903	\$82,405
Sep-05	\$11,592,130	\$0	\$11,592,130	\$641,396	\$10,950,735	\$9,681,874	\$0	\$9,681,874	\$1,268,861
Oct-05	\$11,564,639	(\$995)	\$11,563,644	\$640,748	\$10,922,896	\$10,046,443	\$0	\$10,046,443	\$876,453
Nov-05	\$11,565,139	\$1,417	\$11,566,556	\$640,478	\$10,926,078	\$11,333,085	\$0	\$11,333,085	(\$407,007)
Dec-05	\$11,575,731	\$7,675	\$11,583,406	\$640,829	\$10,942,577	\$11,761,835	\$0	\$11,761,835	(\$819,258)
Jan-06	\$11,053,969	\$332	\$11,054,300	\$644,606	\$10,409,694	\$9,955,613	\$0	\$9,955,613	\$454,081
Feb-06	\$11,053,628	\$0	\$11,053,628	\$645,308	\$10,408,320	\$10,040,221	\$0	\$10,040,221	\$368,099
Mar-06	\$11,049,994	(\$26,775)	\$11,023,218	\$645,146	\$10,378,073	\$12,160,238	\$0	\$12,160,238	(\$1,782,165)
Apr-06	\$11,066,004	(\$36,321)	\$11,029,683	\$645,820	\$10,383,862	\$10,524,961	\$104,000	\$10,628,961	(\$245,099)
May-06	\$11,064,390	\$3,501	\$11,067,891	\$646,198	\$10,421,693	\$11,304,699	\$159,000	\$11,463,699	(\$1,042,006)
Jun-06	\$11,076,821	\$0	\$11,076,821	\$647,385	\$10,429,436	\$11,306,973	\$258,000	\$11,564,973	(\$1,135,537)
Jul-06	\$11,056,557	\$0	\$11,056,557	\$646,495	\$10,410,063	\$9,794,077	\$564,000	\$10,358,077	\$51,986
Aug-06	\$11,052,995	\$0	\$11,052,995	\$646,414	\$10,406,581	\$11,052,116	\$785,000	\$11,837,116	(\$1,430,535)
Sep-06	\$11,153,014	\$0	\$11,153,014	\$650,785	\$10,502,229	\$9,168,419	\$1,599,000	\$10,767,419	(\$265,190)
Oct-06	\$11,116,487	\$6,351	\$11,122,838	\$650,515	\$10,472,323	\$8,575,969	\$3,280,000	\$11,855,969	(\$1,383,646)
Nov-06	\$11,146,017	(\$8,222)	\$11,137,795	\$652,916	\$10,484,879	\$3,321,392	\$8,751,000	\$12,072,392	(\$1,587,513)
Dec-06	\$11,146,017	\$0	\$11,146,017	\$652,916	\$10,493,101	\$0	\$0	\$11,493,079	(\$999,978)
Jan-07	\$11,146,017	\$0	\$11,146,017	\$652,916	\$10,493,101	\$0	\$0	\$11,569,427	(\$1,076,326)
Feb-07	\$11,146,017	\$0	\$11,146,017	\$652,916	\$10,493,101	\$0	\$0	\$11,645,775	(\$1,152,674)
Mar-07	\$11,146,017	\$0	\$11,146,017	\$652,916	\$10,493,101	\$0	\$0	\$11,722,124	(\$1,229,023)
Apr-07	\$11,146,017	\$0	\$11,146,017	\$652,916	\$10,493,101	\$0	\$0	\$11,798,472	(\$1,305,371)
May-07	\$11,146,017	\$0	\$11,146,017	\$652,916	\$10,493,101	\$0	\$0	\$11,874,820	(\$1,381,719)
Jun-07	\$11,146,017	\$0	\$11,146,017	\$652,916	\$10,493,101	\$0	\$0	\$11,951,168	(\$1,458,067)
BIENNIAL									
TOTAL	\$269,187,687	(\$55,425)	\$269,132,262	\$15,528,825	\$253,603,437	\$171,709,510	\$15,500,000	\$269,264,376	(\$15,660,938)

(1) Future Months are Estimated based on Projection from NDPERS.



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Public Employees Retirement System
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Bismarck, North Dakota 58502-1657

Sparb Collins
Executive Director
(701) 328-3900
1-800-803-7377

FAX: (701) 328-3920 • EMAIL: NDPERS@state.nd.us • discovernd.com/NDPERS

Memorandum

TO: PERS Board

FROM: Sparb

DATE: January 10, 2007

SUBJECT: Hardship Application Review Criteria

Melanie Walker from Segal will be at the next board meeting to review the criteria for reviewing hardship applications for the deferred comp program. She will also be available to answer questions. Attached is the presentation she will be going over with the Board.

State of North Dakota 457 Deferred Compensation Plan

Unforeseeable Emergency Distributions

Melanie Walker, JD, Vice President

January 18, 2007

Unforeseeable Emergency Distributions

➤ Requirements under 457 regulations

- “Unforeseeable emergency” must be defined in plan as severe financial hardship of participant resulting from an illness or accident of the participant, spouse or dependent; loss of property due to casualty; or other similar extraordinary and unforeseeable circumstances beyond the control of participant
- Examples of appropriate circumstances under regulations
 - Imminent foreclosure of or eviction from primary residence
 - Medical expenses (including deductibles and prescription drugs)
 - Funeral expenses of spouse/dependent
 - Rebuild home or repair damage not covered by insurance (including as a result of a natural disaster)
- Examples of expenses not appropriate under regulations
 - Purchase of home
 - College tuition

Unforeseeable Emergency Distributions

➤ Additional requirements under regulations

- Emergency must not be able to be relieved through reimbursement from insurance, liquidation of available assets or cessation of deferrals
- Distribution must be limited to minimum amount necessary to satisfy financial hardship, including amounts required to pay taxes
- Purposes other than those in examples may satisfy unforeseeable emergency standards, based on facts and circumstances of each case

Unforeseeable Emergency Distributions

- Hardships under 401(k) plans vs. unforeseeable emergencies under 457 plans
 - Safe harbor for permitting hardships only for specified purposes (including purchase of primary residence and payment of college tuition/expenses)
 - Participant required to take available plan distributions and/or loans prior to requesting a hardship distribution
 - After hardship distribution, plan must suspend deferrals for 6 months

Unforeseeable Emergency Distributions

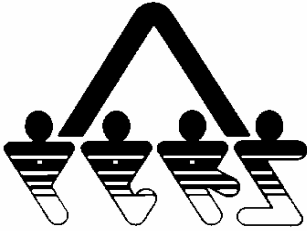
- 401(k) regulations on hardships can provide additional guidance to 457 plans on unforeseeable emergencies
 - Additional clarifications on qualifying medical expenses (deductible under Code §213(d), excluding non-prescription drugs except insulin) and qualifying expenses for damage to residence (deductible under Code §165)
 - Indicate that employer may rely on participant representation regarding other resources available to relieve financial need (unless employer has actual knowledge to the contrary)
 - Other resources include assets of spouse and minor children
 - Documentation of amount of expense is required; cannot rely on participant representation

Unforeseeable Emergency Distributions

- Failure to properly administer unforeseeable emergency distributions is one of top 10 IRS audit issues, including:
 - Inadequate documentation
 - Multiple vendors exceed amount necessary
 - Lack of proper internal controls (monitoring by fiduciary)

- Fiduciary best practices
 - Review and sign off on each distribution request after vendor gathers data
 - Periodic audit of distributions made by vendor(s)
 - Restrict purposes to those specified in regulations
 - Restrict multiple distributions within a specified period (e.g., minimum amount requirement, suspend deferrals after distribution)

Questions?



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Bismarck, North Dakota 58502-1657

Sparb Collins
Executive Director
(701) 328-3900
1-800-803-7377

FAX: (701) 328-3920 • EMAIL: NDPERS@state.nd.us • discovernd.com/NDPERS

Memorandum

TO: NDPERS BOARD

FROM: Kathy

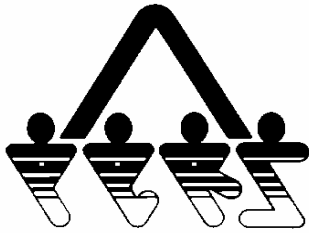
DATE: January 10, 2007

SUBJECT: Chase Insurance/Training

At the December meeting, the Board was informed that Chase Insurance did not respond to our request to address the non-compliance of one of its agents with our training requirements. Staff notified Chase that the Board had reviewed this situation and found them to be out of compliance with our contract, and that the Board will consider taking action pursuant to our administrative rules at its January meeting.

Chase has instructed us to remove the agent and has assigned the agent's clients to another eligible representative.

This action brings Chase into compliance with our training requirements. Therefore, no further action is required.



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Executive Director
(701) 328-3900
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FAX: (701) 328-3920 • EMAIL: NDPERS@state.nd.us • discovernd.com/NDPERS

Memorandum

TO: PERS Board

FROM: Deb Knudsen

DATE: January 10, 2007

SUBJECT: LASR Project Status Report

Attached is the status report for the LASR project through December 2006. Everything continues to be on schedule and within the budget established. Staff will begin reviewing the proposals received on Wednesday, January 17th. As the board meeting is the day after the bid opening, we will provide you with pertinent information as it becomes available.



L.R. Wechsler, Ltd.

North Dakota Public Employees Retirement System

Legacy Application System Review Project

Monthly Status Report – December 31, 2006

Activities and tasks accomplished this reporting period

- Procurement Activities
 - Provided support and assistance in drafting appropriate responses to bidders' questions.
 - Provided support and assistance at the bidders' conference.
 - Began preparation for receipt of proposal
 - Discussed with Sparb and Deb activities required after receipt of proposals: checking them in, conducting minimum qualifications, conducting cost review for those above budget, planning for review of technical proposal.
 - Gathered material for evaluation orientation session(s) week of January 16th.

Activities planned for the next month

- Procurement Activities
 - Conduct Steps I-III of proposal evaluation:
 - Minimum Qualifications Review – eliminate non-qualifiers
 - Cost Review – eliminate those above or below threshold. This is conditional upon there being three vendor's cost proposal within the threshold.
 - Detailed Proposal Scoring – establish schedule for proposals to be reviewed and assign responsibilities for specific sections.
 - Distribute clarifying questions to bidders and incorporate in scoring.

Problems Encountered this Period

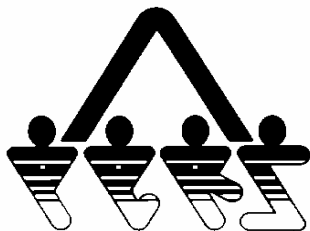
- None

Reconciliation of Progress

- None

Problems Anticipated Next Period

- None



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1-800-803-7377

FAX: (701) 328-3920 • EMAIL: NDPERS@state.nd.us • discovernd.com/NDPERS

Memorandum

TO: NDPERS Board

FROM: Kathy

DATE: January 10, 2007

SUBJECT: Board Election

The term of retirement board member Rosey Sand expires on June 30, 2007. Pursuant to Section 71-01-02-01 of the election rules, we must conduct an election to fill the vacancy. The Retirement Board must appoint a committee of three from its membership, one of whom must be designated as chair, to oversee the election process.

The following is the election schedule developed in compliance with the rules:

May 4, 2007 – Deadline to file nomination petitions

June 1, 2007 – Ballots are sent out to membership

June 15, 2007 – Deadline to return ballots

June 18, 2007 – Ballot canvassing

June 21, 2007 – Presentation of results to Board membership

June 22, 2007 – Notification to candidate

BOARD ACTION REQUESTED:

Appoint a committee of three from the Board and designate one as chairman.

Legislative Update

Current Status Report

Tracking List: 1 - NDPERS Bill Tracking List 2007

[HB 1078](#) Career and Technical Education to participate in NDPERS

Title: Relating to participation by employees of the state board for career and technical education in the public employees retirement system; relating to participation by employees of the state board for career and technical education in the public employees retirement system; and to provide an appropriation.

Sponsor(s):

Government and Veterans Affairs Committee

File Date	Chamber	Comm	Action	Journal Page
01/03	H	GVA	Introduced, first reading, referred Government and Veterans Affa	<u>HJ0041</u>
01/11	H		COMMITTEE HEARING 01/11 09:00 AM	

HB 1179 Relating to participation in the uniform group insurance program.**Title:** Relating to participation in the uniform group insurance program.**Sponsor(s):**

Rep. Price, N. Johnson, Porter

Sen. Fischer, J. Lee, Lyson

File Date	Chamber	Comm	Action	Journal Page
01/04	H	HUMSER	Introduced, first reading, referred Human Services	HJ0060

HB 1244 A BILL for an Act to amend and reenact section 54-52.1-04 of the North Dakota Century Code, relating to confidentiality of pharmaceutical manufacturer rebates obtained by the public employees retirement system.**Title:** Relating to confidentiality of pharmaceutical manufacturer rebates obtained by the public employees retirement system.**Sponsor(s):**

Rep. Kasper, Dosch, N. Johnson, Keiser, Ruby

Sen. Klein

File Date	Chamber	Comm	Action	Journal Page
01/08	H	GVA	Introduced, first reading, referred Government and Veterans Affa	HJ0078

SB 2022 PERS Budget**Title:** (At the request of the Governor) A BILL for an Act to provide an appropriation for defraying the expenses of various state retirement and investment agencies.**Sponsor(s):**

Appropriations Committee

File Date	Chamber	Comm	Action	Journal Page
01/09	S	APPR	Introduced, first reading, referred Appropriations	SJ0015
01/22	S		COMMITTEE HEARING 01/22 09:30 AM	
01/22	S		COMMITTEE HEARING 01/22 10:30 AM	

SB 2044 Supplemental retiree benefit payments

Title: Relating to supplemental retiree benefit payments under the public employees retirement system.

Sponsor(s):

Government and Veterans Affairs Committee

File Date	Chamber	Comm	Action	Journal Page
01/03	S	GVA	Introduced, first reading, referred Government and Veterans Affa	SJ0018
01/12	S		COMMITTEE HEARING 01/12 09:00 AM	

SB 2045 Prescription drug coverage; life insurance coverage; retiree health credit for married couples; sick leave to a trust; temporary employee;

Title: Relating to prescription drug coverage under the uniform group insurance program; relating to minimum life insurance benefits coverage, the retiree health benefits fund, employer payment of a temporary employee's health insurance premium, temporary employee eligibility, and bids for prescription drug coverage under the uniform group insurance program.

Sponsor(s):

Government and Veterans Affairs Committee

File Date	Chamber	Comm	Action	Journal Page
01/03	S	GVA	Introduced, first reading, referred Government and Veterans Affa	SJ0018
01/11	S		COMMITTEE HEARING 01/11 09:30 AM	

SB 2046

Title: Relating to definitions under the teachers' fund for retirement; relating to the incorporation of federal law changes, employer contributions and service credit purchases, eligibility for and determination of benefits, vesting, early retirement, returning to teaching, and accepting a refund from the fund under the teachers' fund for retirement; to provide for application; and to provide an appropriation.

Sponsor(s):

Government and Veterans Affairs Committee

File Date	Chamber	Comm	Action	Journal Page
01/03	S	GVA	Introduced, first reading, referred Government and Veterans Affa	SJ0018

SB 2047 Deferred comp program auto enrollment at \$25 per month

Title: Relating to automatic enrollment of employees in the deferred compensation program under the public employees retirement system.

Sponsor(s):

Government and Veterans Affairs Committee

File Date	Chamber	Comm	Action	Journal Page
01/03	S	GVA	Introduced, first reading, referred Government and Veterans Affa	SJ0018
01/12	S		COMMITTEE HEARING 01/12 09:30 AM	

SB 2048 Definition of final average salary; conversion of sick leave;

Title: Relating to confidentiality of retirement records; relating to terms, final average salary calculations, payment of delayed retirement benefits, conversion of sick leave, temporary employee purchase of service credit, compliance with the Internal Revenue Code, employer service credit purchase, automatic refund of account balances, and vesting under the highway patrolmen's retirement and public employees retirement systems.

Sponsor(s):

Government and Veterans Affairs Committee

File Date	Chamber	Comm	Action	Journal Page
01/03	S	GVA	Introduced, first reading, referred Government and Veterans Affa	SJ0018
01/12	S		COMMITTEE HEARING 01/12 10:00 AM	

SB 2050 Increase the required monthly contribution to the Retiree Health Benefit Fund from 1% of monthly salary to 1.15% of monthly salary and increase monthly retiree health credit from \$4.50 per year to \$5.00 per year

Title: Relating to contributions and benefits under the retiree health benefits fund of the public employees retirement system.

Sponsor(s):

Government and Veterans Affairs Committee

File Date	Chamber	Comm	Action	Journal Page
01/03	S	GVA	Introduced, first reading, referred Government and Veterans Affa	SJ0019
01/11	S		COMMITTEE HEARING 01/11 10:00 AM	

SB 2051 Increase the employer contribution rate from 16.17% to 21.7% for highway patrolment; 4.12% to 5.12% in the hybrid plan

Title: Relating to employer contributions and increases to certain retirees' retirement payments under the public employees retirement system; and to provide an effective date.

Sponsor(s):

Government and Veterans Affairs Committee

File Date	Chamber	Comm	Action	Journal Page
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01/03	S	GVA	Introduced, first reading, referred Government and Veterans Affa	SJ0019
01/11	S		COMMITTEE HEARING 01/11 10:30 AM	

SB 2116 Permit ND Association of Counties to participate in the hybrid plan, etc.

Title: Relating to participation by an association of counties in the public employees retirement system, uniform group insurance program, and the deferred compensation program.

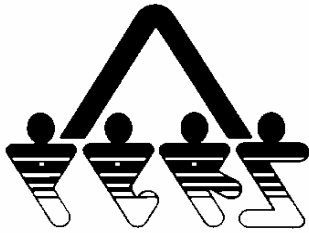
Sponsor(s):

Sen. Krebsbach

File Date	Chamber	Comm	Action	Journal Page
01/03	S	GVA	Introduced, first reading, referred Government and Veterans Affa	SJ0025

- [ND State Legislature](#) :
- [NDUS](#) :
- [Road Conditions](#) :
- [ND Weather](#)

- IT Infrastructure Services
- Information Technology Services
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North Dakota
Public Employees Retirement System
400 East Broadway, Suite 505 • Box 1657
Bismarck, North Dakota 58502-1657

Sparb Collins
Executive Director
(701) 328-3900
1-800-803-7377

FAX: (701) 328-3920 • EMAIL: NDPERS@state.nd.us • discovernd.com/NDPERS

Memorandum

TO: NDPERS Board

FROM: Sharon Schiermeister

DATE: January 10, 2007

SUBJECT: 2006 Annual Report

The 2006 comprehensive annual financial report has been included in your board materials. The report is also available on the NDPERS website under Forms and Publications.

Instead of mailing a copy of the report to each participating employer, an e-mail notice was sent notifying them that the annual report is available on the NDPERS website. The report was submitted to the Government Finance Officers Association with an application for the GFOA Certificate of Excellence in Financial Reporting.

Please let me know if you have any questions on the report.

Enclosure